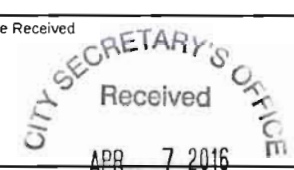


CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 14
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Tudor G.G.	OFFICE USE ONLY Date Received 	
	NICKNAME LAST SUFFIX Uhlhorn		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 2601 S. 77 Sunshine Strip Harlingen, TX 78550	Date Hand-delivered or Date Postmarked APR 7 2016 <i>all 4-7-12</i>	Receipt # <i>HARLINGEN, TX</i> Amount <i>4.51 p.m.</i> Date Processed Date Imaged
	5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Nicholas P	
	NICKNAME LAST SUFFIX "Nick" Consiglio		
	6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1721 Mourning Dove Circle, Harlingen, Texas 78550	
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION 956 536-4605		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year 01/13/2016	THROUGH	Month Day Year 03/28/2016
10 ELECTION	ELECTION DATE Month Day Year 05/07/2016	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) Harlingen City Commissioner - District 2 Place District 2 District Harlingen	12 OFFICE SOUGHT (if known) Harlingen City Commissioner - District 2 Place District 2 District Harlingen	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

2 of 14

13 C / OH NAME Uhlhorn, Tudor	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
---	---

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,000.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 8,083.28
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 824.23
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,500.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Handwritten Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Tudor Uhlhorn, this the 7th day of April, 2016, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering

Amanda C. Elizondo
Printed name of officer administering

City Secretary
Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Uhlhorn, Tudor	19 Filer ID
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,000.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 1,500.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 7,656.77
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 426.51
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/14
2 FILER NAME Uhlhorn, Tudor		3 Filer ID
4 Date 02/01/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Julie (Mrs.)	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 5337 Kelsey Road Dallas, TX 75229		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boggus, Frank N. (Mr.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code P.O. Box 1111 Harlingen, TX 78551		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Jack (Mr.)	Amount of Contribution (\$) \$350.00
Contributor address; City; State; Zip Code P.O. Box 703 Combes, TX 78535		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De La Garza, Connie (Mr.)	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 503 E. Harrison Harlingen, TX 78550		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Robert (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 4501 Mountan Creek Parkway Dallas, TX 75236		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/14
2 FILER NAME Uhlhorn, Tudor		3 Filer ID
4 Date 02/23/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Robert L. (Mr.)	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 990 N. Bowie Street San Benito, TX 78586		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliff, Joe D. (Mr.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 1307 W. Harrison Ave. Harlingen, TX 78550		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliff, William L. & Merrillee	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 27143 State Hwy 345 San Benito, TX 78586		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewers, Norbert S. & Ruthie I.	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 138 Palm Valley Dr. W Harlingen, TX 78550		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guevara, John D. & Joanne L.	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code 3205 Seminole Court Harlingen, TX 78550		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/14
2 FILER NAME Uhlhorn, Tudor		3 Filer ID
4 Date 03/19/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kornegay, Pat (Mr.) <hr/> 6 Contributor address; City; State; Zip Code 28125 Norma Linda San Benito, TX 78586	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leal, J.G. or Norma O. <hr/> Contributor address; City; State; Zip Code 2726 Clifford Drive Harlingen, TX 78550	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lonon, Kathleen D. <hr/> Contributor address; City; State; Zip Code 5218 Palm Valley Dr. South Harlingen, TX 78552	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meade, Jonathan M. & Elena <hr/> Contributor address; City; State; Zip Code 427 Woodland Dr. Harlingen, TX 78550	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Henry & Kelly <hr/> Contributor address; City; State; Zip Code 2801 Pine Valley Dr. Harlingen, TX 78550	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/14
2 FILER NAME Uhlhorn, Tudor		3 Filer ID
4 Date 02/23/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scaief, Michael F. & Elizabeth <hr/> 6 Contributor address; City; State; Zip Code P.O. Box 1064 San Benito, TX 78586	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Anne K. & Robert W. <hr/> Contributor address; City; State; Zip Code 5348 Papaya Circle Harlingen, TX 78552	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trolinger, Jim (Mr.) <hr/> Contributor address; City; State; Zip Code 22717 Briggs Coleman Harlingen, TX 78550	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Uhlhorn, Martha (Ms.) <hr/> Contributor address; City; State; Zip Code 325 White House Farm Drive Chesterfield, MO 63017	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf III, Albert <hr/> Contributor address; City; State; Zip Code 2727 Kirby Drive - 30W Houston, TX 77098	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/14
2 FILER NAME Uhlhorn, Tudor		3 Filer ID
4 Date 02/23/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woolam, Dennis & Lorraine <hr/> 6 Contributor address; City; State; Zip Code P.O. Box 2346 San Benito, TX 78586	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 9/14
2 FILER NAME Uhlhorn, Tudor		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 01/19/2016	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Uhlhorn, Tudor (Mr.)	9 Loan Amount (\$) \$500.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 2601 S. 77 Sunshine Strip Harlingen, TX 78550	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)
Date of loan 03/12/2016	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Uhlhorn, Tudor (Mr.)	Loan Amount (\$) \$1,000.00
Is lender a financial institution? No	Lender address; City; State; Zip Code 2601 S. 77 Sunshine Strip Harlingen, TX 78550	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation		Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 10/14	2 FILER NAME Uhlhorn, Tudor	3 Filer ID
4 Date 01/27/2016	5 Payee name Harland Clarke	
6 Amount (\$) \$72.86	7 Payee address; City; State; Zip Code 15955 La Cantera Parkway San Antonio, TX 78256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Checks & Deposit Books for Campaign Bank Account
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/11/2016	Candidate/Officeholder name Payee name Jackson Square Events Center	
Amount (\$) \$176.00	Office sought Office held Payee address; City; State; Zip Code 301 E. Jackson Street Harlingen, TX 78550	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Venue Rental & Beverages for Campaign Announcement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/22/2016	Candidate/Officeholder name Payee name M5 Designs	
Amount (\$) \$811.88	Office sought Office held Payee address; City; State; Zip Code 1405 S. Palm Court Drive Harlingen, TX 78552	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Partial Vehicle Wrap - Labor and Materials - 3M Control Tack and Laminate Installed
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/2 Rpt: 11/14	2 FILER NAME Uhlhorn, Tudor	3 Filer ID
4 Date 02/22/2016	5 Payee name Meade Marketing, Inc.	
6 Amount (\$) \$472.57	7 Payee address; City; State; Zip Code 211 W. Jefferson - Suite 7 Harlingen, TX 78550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Press Release, Campaign Banner, Postcards, Creative for Banner & Postcards
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/03/2016	Payee name Meade Marketing, Inc.	
Amount (\$) \$1,323.46	Payee address; City; State; Zip Code 211 W. Jefferson - Suite 7 Harlingen, TX 78550	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Creative & Vinyl for Billboard & 1 Months Billboard Rental, Creative for Push Cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/12/2016	Payee name Meade Marketing, Inc.	
Amount (\$) \$4,800.00	Payee address; City; State; Zip Code 211 W. Jefferson - Suite 7 Harlingen, TX 78550	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Billboard Rental 2nd Month, Push Cards Production, Yard Signs, Creative for Signs & Wrap
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/3 Rpt: 12/14	2 FILER NAME Uhlhorn, Tudor	3 Filer ID
4 Date 03/11/2016	5 Payee name H.E.B.	
6 Amount (\$) \$94.44 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1213 S. Commerce Street Harlingen, TX 78550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wraps Party Tray, Veggie Tray and Fresh Fruit Tray for Campaign Announcement Event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/11/2016	Payee name H.E.B.	
Amount (\$) \$24.62 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 613 S. Expressway 83 Harlingen, TX 78550	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Beverages for Campaign Announcement Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/10/2016	Payee name Henry's Party Supply & Food Service	
Amount (\$) \$22.55 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 715 S. Lewis Lane Harlingen, TX 78552	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Plastic Cups and Utensils for Announcement Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/3 Rpt: 13/14	2 FILER NAME Uhlhorn, Tudor	3 Filer ID
4 Date 03/24/2016	5 Payee name Henry's Party Supply & Food Service	
6 Amount (\$) \$13.48 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 715 S. Lewis Lane Harlingen, TX 78552	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cups for Campaign Mixer 3/29/16
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/11/2016	Payee name Johnny's True Value Hardware	
Amount (\$) \$13.41 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 914 W. Tyler Harlingen, TX 78550	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Screws & Washers for Campaign Signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/11/2016	Payee name Johnny's True Value Hardware	
Amount (\$) \$20.94 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 914 W. Tyler Harlingen, TX 78550	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Screws & Bolts for Campaign Sign Installation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 3/3 Rpt: 14/14	2 FILER NAME Uhlhorn, Tudor	3 Filer ID
4 Date 03/11/2016	5 Payee name McCoy's Building Supply	
6 Amount (\$) \$119.66 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3601 W. Expressway Harlingen, TX 78552	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wooden Stakes, Nails and Screws for Yard Signs
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/04/2016	Payee name Office Depot / Office Max	
Amount (\$) \$29.21 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 605 S. Expressway 83 Harlingen, TX 78550	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailing Labels for Campaign Mailings (Kick Off Event)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2016	Payee name United States Postal Service	
Amount (\$) \$88.20 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1502 New Combes Hwy. Harlingen, TX 78550	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps for Campaign Announce Event Postcards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held